

County: Marathon  
NORTH CENTRAL HEALTH CARE FACILITY  
1100 LAKE VIEW DRIVE

Facility ID: 9820

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WAUSAU 54403 Phone: (715) 848-4600

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? Yes

Number of Beds Set Up and Staffed (12/31/00): 320

Total Licensed Bed Capacity (12/31/00): 345

Number of Residents on 12/31/00: 309

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Average Daily Census:

County

Skilled

No

Yes

315

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		24.9
Supp. Home Care-Personal Care	No					1 - 4 Years		35.0
Supp. Home Care-Household Services	No	Developmental Disabilities	5.5	Under 65	13.9	More Than 4 Years		40.1
Day Services	No	Mental Illness (Org./Psy)	24.3	65 - 74	14.6			-----
Respite Care	No	Mental Illness (Other)	11.3	75 - 84	33.3			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	31.4	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.3		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	2.3		100.0	(12/31/00)		
Other Meals	No	Cardiovascular	13.9	65 & Over	86.1	-----		
Transportation	No	Cerebrovascular	7.1		-----	RNs		16.3
Referral Service	No	Diabetes	7.1	Sex	%	LPNs		3.4
Other Services	No	Respiratory	4.5		-----	Nursing Assistants		
Provide Day Programming for Mentally Ill	No	Other Medical Conditions	21.7	Male	39.8	Aides & Orderlies		
Provide Day Programming for Developmentally Disabled	Yes		100.0	Female	60.2			
								41.1
								100.0

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Managed Care				Percent Of All Residents
	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	Total	
			Rate			Rate			Rate			Rate			Rate		
Int. Skilled Care	1	11.1	\$249.00	5	1.9	\$124.61	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	6	1.9%
Skilled Care	8	88.9	\$249.00	243	90.0	\$106.43	0	0.0	\$0.00	30	100.0	\$150.00	0	0.0	\$0.00	281	90.9%
Intermediate	---	---	---	13	4.8	\$88.25	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	13	4.2%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	9	3.3	\$155.91	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	9	2.9%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	9	100.0		270	100.0		0	0.0		30	100.0		0	0.0		309	100.0%

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
		-----				
		% Needing Assistance of				Total
Percent Admissions from:		Activities of	%	One Or Two Staff	% Totally Dependent	Number of Residents
Private Home/No Home Health	10.0	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	1.3	34.0	64.7	309
Other Nursing Homes	3.5	Dressing	10.4	51.8	37.9	309
Acute Care Hospitals	77.9	Transferring	28.2	41.7	30.1	309
Psych. Hosp. -MR/DD Facilities	8.2	Toilet Use	18.4	31.7	49.8	309
Rehabilitation Hospitals	0.0	Eating	47.2	32.0	20.7	309
Other Locations	0.4	*****				
Total Number of Admissions	231	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	5.2	Receiving Respiratory Care	9.1	
Private Home/No Home Health	43.6	Occ/Freq. Incontinent of Bladder	63.4	Receiving Tracheostomy Care	0.3	
Private Home/With Home Health	1.2	Occ/Freq. Incontinent of Bowel	47.2	Receiving Suctioning	1.0	
Other Nursing Homes	4.6			Receiving Ostomy Care	2.9	
Acute Care Hospitals	6.6	Mobility		Receiving Tube Feeding	3.9	
Psych. Hosp. -MR/DD Facilities	2.9	Physically Restrained	12.3	Receiving Mechanically Altered Diets	52.8	
Rehabilitation Hospitals	0.0					
Other Locations	5.0	Skin Care		Other Resident Characteristics		
Deaths	36.1	With Pressure Sores	7.8	Have Advance Directives	85.1	
Total Number of Discharges		With Rashes	13.6	Medications		
(Including Deaths)	241			Receiving Psychoactive Drugs	60.8	
*****						
Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities						
*****						
	This Facility	Other Hospital-Based Facilities		All Facilities		
	%	%	Ratio	%	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	91.3	87.5	1.04	84.5	1.08	
Current Residents from In-County	96.4	83.6	1.15	77.5	1.24	
Admissions from In-County, Still Residing	33.3	14.5	2.30	21.5	1.55	
Admissions/Average Daily Census	73.3	194.5	0.38	124.3	0.59	
Discharges/Average Daily Census	76.5	199.6	0.38	126.1	0.61	
Discharges To Private Residence/Average Daily Census	34.3	102.6	0.33	49.9	0.69	
Residents Receiving Skilled Care	92.9	91.2	1.02	83.3	1.11	
Residents Aged 65 and Older	86.1	91.8	0.94	87.7	0.98	
Title 19 (Medicaid) Funded Residents	87.4	66.7	1.31	69.0	1.27	
Private Pay Funded Residents	9.7	23.3	0.42	22.6	0.43	
Developmentally Disabled Residents	5.5	1.4	4.03	7.6	0.72	
Mentally Ill Residents	35.6	30.6	1.16	33.3	1.07	
General Medical Service Residents	21.7	19.2	1.13	18.4	1.18	
Impaired ADL (Mean) *	59.9	51.6	1.16	49.4	1.21	
Psychological Problems	60.8	52.8	1.15	50.1	1.21	
Nursing Care Required (Mean) *	11.4	7.8	1.46	7.2	1.60	